



CITY AND COUNTY OF DENVER

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December 15, 2005

Victor Ketellapper, P.E.
Project Manager
U.S. Environmental Protection Agency – Region VIII
Superfund Program
999 18th St., Suite 300
Denver, Colorado 80202-2466

Dear Mr. Ketellapper:

The November (2005) monthly status reports for the VB/I-70 Community Health Program are appended. As always, please feel free to contact me if you have any questions or would like to modify the content, format, or distribution of future reports.

Sincerely,

Martha F. Hoff, CIH, CSP
VB/I-70 Community Health Program Administrator

Enclosures (8)

VB/I-70 CHP November 2005 Program Activities Report
VB/I-70 CHP November 2005 Steering Committee Report
VB/I-70 CHP November 2005 Arsenic Data and Case Management Subcommittee Report
VB/I-70 CHP November 2005 Biomonitoring Subcommittee Report
VB/I-70 CHP November 2005 Health Education and Community Outreach Subcommittee Report
VB/I-70 CHP November 2005 Lead Data and Case Management Subcommittee Report
Meeting Minutes – Lead Data and Case Management (11/14/2005)
VB/I-70 CHP November 2005 Small Grants and Community Funds Report

cc:

Lorraine Granado – Cross Community Coalition
Beverly Lumumba, Ph.D. – Clayton Neighborhood Association
Michael Maes – Swansea Neighborhood
Gloria A. Shearer – Cole Neighborhood Association
Akwe Starnes – Whittier Neighborhood Association
Anthony Thomas – Civic Association of Clayton
Jim Weaver – Cole Neighborhood Association
Raquel Holquin – CEASE
Joan Hooker – Clayton Neighborhood Association

(via email only):

Sandy Douglas – Cole Neighborhood Association
Celia VanDerLoop – City and County of Denver, Department of Environmental Health
Bill Benerman – City and County of Denver, Department of Environmental Health
Gene Hook – City and County of Denver, Department of Environmental Health
Jason Salas – City and County of Denver, Department of Environmental Health
Beverly Tafoya-Dominguez – City and County of Denver, Department of Environmental Health
Jennifer Chergo – U.S. Environmental Protection Agency, Region VIII
Patricia Courtney – U.S. Environmental Protection Agency, Region VIII
Jane Mitchell – Colorado Department of Public Health and Environment
Mishelle Macias – Colorado Department of Public Health and Environment
Wendy Hawthorne – Northeast Denver Housing Center
Clementine Pigford – Northeast Denver Housing Center
Tonya Hope – c/o Northeast Denver Housing Center
Paul Melinkovich, M.D. – Denver Health and Hospital Authority
Mark Anderson, M.D. – Denver Health and Hospital Authority/PEHSU
Chris Poulet – Agency for Toxic Substances and Disease Registry
George Weber – George Weber Inc. Environmental

**VB/I-70 Community Health Program
November 2005 Status Report
Program Activities Report**

November Activities and Tasks

Health Education and Community Outreach

Community Health Workers

- Continued canvassing activities.
- Continued participation in cultural diversity workshop development activities with Dr. Beverly Lumumba.
- Resumed weekly Friday meetings.

Program Management, Development, Administration and Community Partnership Management

- Continued tracking of all relevant field measures.

Development

- Completed development of outreach posters on Mexican candy lead hazards and flyer on costume jewelry lead hazards.
- Completed development of CHP fact sheet for inclusion with DHHA lead results notification letters.
- Continued development of database to store, organize, and manipulate field data.
 - Began input of first program year field data.
 - Began testing initial queries and reporting capabilities.
- Completed final draft of home visit evaluation data collection form and evaluation protocol.
- Completed review of CEASE recommendations for realtor and contractor outreach; outlined estimated program capabilities.
- Continued to identify resources for realtor, landlord, and contractor outreach.
- Finalized development of daycare, preschool, and DPS class presentations.

Administration

- Completed contract signature process for current and two new CHW's.
- Initiated contract signature process for two additional new CHW's.
- Sent NDHC contract to Mayor's Office for signature.
- Hired 0.5 FTE staff member to assist in development of real estate and contractor outreach project.
- Began scheduling daycare/preschool presentations.

Community Partnership

- See Health Education and Community Outreach Subcommittee November report, as submitted.
- Awarded one grant – see Small Grants and Community Funds November Report.

Biomonitoring

- See Biomonitoring Subcommittee November report, as submitted.

Case Management

- Assisted DHHA medical/mapping programmer in fine-tuning lead database and developing electronic reporting format for case management activities.
- See Arsenic Data and Case Management Subcommittee November report, as submitted.
- See Lead Data and Case Management Subcommittee November report, as submitted.

December Activities and Tasks

Health Education and Outreach

Community Health Workers

- Participate in December Working Group meeting.
- Participate in focus meeting – second home visit content (1/30/06).
- Continue canvassing and community activities.

Program Management, Development, Administration and Community Partnership Management

- Continue to track relevant field data.

Development

- Distribute Mexican candy lead hazards posters and flyers on vending/costume jewelry lead hazards.
- Begin to assess individual audience and venue potential relative to real estate and contractor outreach.
- Begin to assemble outreach material samples for real estate and contractor outreach.
- Continue review of ROD, cooperative agreement, and CHEOP to produce overarching matrix of goals, objectives, and evaluation parameters specified in documents.
- Continue entering field data into database; debug queries and reports.
- Complete development of home visit evaluation protocol and field form; begin evaluation project.
- Begin process to formally define second year program components.

Administration

- Complete signature process of remaining CHW contracts.
- Complete signature process for NDHC contract.
- Compile first program year budget report for EPA. Evaluate Small Grants applications, as received.
- Continue to schedule daycare/preschool presentations.

Community Partnership

- Partner to develop display “collage poster” of Mexican candy lead hazard for use in outreach activities.
- Continue to support community and EPA partnership in obtaining remaining sampling access agreements.
- Produce available first program year data/evaluation report for use at small focus group meeting (Year Three Proposal) on 1/06/2006.

Future Activities and Task

Health Education and Outreach

Community Health Workers

- As time permits, assist in developing methods to reach mothers with newborns to provide early intervention education; conduct focused “mini” outreach campaign if feasible.
- Utilizing canvassing experiences, work with a health educator to define critical lead topics for a first time home visit and effective presentation of written materials.

Program Management, Development, Administration and Community Partnership Management

- Define additional program outreach methods and audiences (e.g. school programs, community events, media campaigns, etc.).
- Evaluate and analyze program data.

Development

- Compile and distribute summary of review of ROD, cooperative agreement, and

CHEOP along with overarching matrix of goals, objectives, and evaluation parameters.

- Finalize year two outreach content and messages based upon community decisions.

Administrative

- Utilize folder/divider presentation for outreach material.
- Release first program year data and evaluation report.

Community Partnership

- Partner with Outreach Development Group and other community leaders and members to define year two program content and messages – meeting scheduled for 1/30/2006.
- Partner with community to assess first program year evaluation data and potential third program year content – meeting scheduled for 1/06/2006.
- Work with Cross Community Coalition to develop a newsletter article on CHP.

**VB/I-70 Community Health Program
November 2005 Status Report
Subcommittee Report**

Arsenic Data and Case Management Subcommittee	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook
CDPHE	Jane Mitchell - chair

Arsenic Data and Case Management Subcommittee Tasks
<ol style="list-style-type: none"> 1. Identify and select preferred reporting methods and format for arsenic data. [<i>Complete</i>] 2. Develop a quality assurance and quality control plan for arsenic data management. [<i>Complete</i>] 3. Develop a secure database system to assist with arsenic data management, reporting, and tracking. [<i>Complete</i>] 4. Develop acceptable case tracking protocols. [<i>Complete</i>] 5. Develop case coordination protocols. [<i>Complete</i>] 6. Identify appropriate trigger levels for case management and case coordination. [<i>Complete</i>] 7. Develop evaluation and reporting mechanisms, and schedule for arsenic data and case management issues. [<i>In progress</i>] 8. Report to the Steering Committee on progress, status, and issues requiring resolution. [<i>On-going</i>]

November Activities and Tasks
Four children are being followed for elevated hair arsenic test results. CDPHE is coordinating with DEH to provide follow-up to one family with 2 children who have both elevated BLL and hair arsenic.
December Activities and Tasks
Coordinate with medical staff at Inner City Health Clinic to obtain retests for hair and urine arsenic while children are being retested for lead. Sample containers and collection instructions will be provided to the clinic. CDPHE will ship samples to CTQ lab in Quebec for analysis. Segmental hair analysis and speciated urine analysis will be requested.
Future Activities and Task
Continue to work with families whose children have elevated tests. Retest periodically to confirm that arsenic levels are declining, or there is no evidence of on-going arsenic exposure.

**VB/I-70 Community Health Program
November 2005 Status Report
Subcommittee Report**

Biomonitoring Subcommittee	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook
DHHA	Marti Potter
	Linda Kauffman
CDPHE	Mishelle Macias – co chair, Lead
	Jane Mitchell – co chair, Arsenic
Community Technical Advisor	Michael Kosnett, MD (CEASE)
ATSDR	Chris Poulet
DHHA	Paul Melinkovich, MD
PEHSU	Mark Anderson, MD

Biomonitoring Subcommittee Tasks
<ol style="list-style-type: none"> 1. Identify and select preferred biological media and test methods for arsenic and lead biomonitoring. Complete 2. Recommend preferred methodologies for biological sample collection. Complete 3. Develop a quality assurance/quality control plan for biomonitoring program. 4. Identify and evaluate suitable laboratory protocols and assist with selection of acceptable analytical laboratories with a demonstrated ability to meet program data quality requirements. Complete 5. Develop required consent agreements to provide informed consent for community members considering participation in biomonitoring program. Complete 6. Coordinate with DHHA to address HIPPA concerns with blood lead biomonitoring activities and to provide required data confidentiality. Complete 7. Develop mechanisms to ensure the medical confidentiality of biomonitoring information. Complete 8. Ensure that appropriate state IRB reviews are conducted, if required, and coordinate with DHHA to determine need for COMIRB review. Complete 9. Interface with the community outreach and health education planning process as needed. Complete 10. Develop evaluation and reporting mechanisms, and schedule for biomonitoring issues, as requested by the steering committee. Ongoing 11. Report to the Steering Committee on progress, status, and issues requiring resolution. Ongoing

November Activities and Tasks
<p>The biomonitoring subcommittee met on November 14, 2005 at CDPHE to discuss issues with QNS samples and reporting of those blood lead results by Medtox. Medtox representatives were conferenced in via phone for the meeting and discussions ensued regarding QNS samples. Medtox offered to retest some samples, as the QA/QC samples prepared by the Wisconsin State Lab of Hygiene also returned as QNS. It appears the high number of QNS values reported by Medtox is a result of their internal protocol which relies on having up to 3 punches available from each filter</p>

paper sample to be able to verify test results. CDPHE staff will look into using larger capillary tubes (larger bores) to collect the samples and saturate the Medtox filter paper, and also investigate having WDHL prepare QC samples with a larger volume of blood next year. DHHA lab staff will provide ordering information on the recommended capillary tubes.

December Activities and Tasks

Attend meetings as necessary. Compile data summaries to support program evaluation efforts.

Future Activities and Tasks

Analyze and evaluate program data to support discussions about how to improve the program for Year 2. Attend program evaluation focus group meetings with DEH and the community in January.

**VB/I-70 Community Health Program
November 2005 Status Report
Subcommittee Report**

Health Education and Community Outreach Subcommittee	
US EPA Region VIII	Patricia Courtney – adjunct member
DEH	Jay Salas
	Beverly Tafoya-Dominguez – chair
DHHA	Marti Potter – adjunct member
ATSDR	Chris Poulet – adjunct member
Community	Gloria Shearer, Anthony Thomas

Health Education and Community Outreach Subcommittee Tasks
<ol style="list-style-type: none"> 1. Develop plans for outreach and program recruitment methods. <i>Complete, with ongoing evaluation.</i> 2. Work with communities to identify preferred testing locations, to develop preferred program advertisement methods, and to define recruitment strategies to help maximize program participation. <i>Complete, with ongoing evaluation and revision as needed.</i> 3. Develop materials for use during education and outreach activities. <i>Complete, with ongoing revisions and development as identified (see #6)</i> 4. Develop distribution plans for outreach and educational materials. <i>Ongoing</i> 5. Develop evaluation and reporting mechanisms for education and outreach activities and the identification of program revisions. <i>Ongoing, within CHP program development activities</i> 6. Develop a plan for on-going communication and feedback from the community regarding health education and outreach materials, as needed. <i>Complete, with ongoing evaluation.</i> 7. Report to the Steering Committee on progress, status, and issues requiring resolution. <i>Ongoing</i>

November Activities and Tasks
<p>Finished development of fact sheets about lead hazards in jewelry. Provided input about DHHA results letters and the referral sheet that is to accompany the letters. Designing a collage to place in local schools or libraries about lead hazards in jewelry and candy. Determine groups who can submit a small grant application to carryout the compilation of the educational materials packets. Revised childcare presentations to be VB/I-70 specific. Identify and contact childcare and school based programs who serve 2-5 year old children so as to conduct lead poisoning prevention education (i.e. the importance of hand washing and nutrition in protecting children from lead) with both children and parents.</p>
Future Activities and Tasks
<p>Continue to conduct presentations about lead poisoning prevention with children and parents at childcare centers, schools identified by the staff and community. Work with the VB/I-70 administrative staff, CHWs and biomonitoring staff to develop a master outreach plan for next year and possibly the following year.</p>

**VB/I-70 Community Health Program
November 2005 Status Report
Subcommittee Report**

Lead Data and Case Management Subcommittee	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook, Martha Hoff
DHHA	Marti Potter
	Mark Anderson, MD - chair
CDPHE	Mishelle Macias

Lead Data and Case Management Subcommittee
<ol style="list-style-type: none"> 1. Identify and select preferred reporting methods and format for lead data. Complete with ongoing reports 2. Develop a quality assurance and quality control plan for lead data management. 3. Develop acceptable case tracking protocols. Complete 4. Develop case coordination protocols. Complete 5. Identify appropriate trigger levels for case management and case coordination. Complete 6. Develop evaluation and reporting mechanisms, and schedule for lead data and case management issues. Ongoing 7. Report to the Steering Committee on progress, status, and any issues needing resolution. Ongoing

November Activities and Tasks
See attached meeting minutes.
December Activities and Tasks
Future Activities and Tasks

Meeting Minutes
Lead Data and Case Management Work Group
November 14, 2005

Present: Martha Hoff, Mishelle Macia, Rashonda Gordon, Kevin McCullen, Amie Staudenmaier, Ingrid Cannon, Jessica Luna and Marti Potter

Chair: Paul Melinkovich, MD

Issue/Discussion	Actions/Decision	Lead Person	Complete By
1. Minutes: Dr. Melinkovich will not be able to chair further meetings and be involved in the VB I-70 grant. He will find a representative for the steering committee from CHS.	Find Dr. Melinkovich replacement.	Dr. Melinkovich	12/12/05
2. Adding address capability for sorting VB/I70 tests: Determining annualized results for tests and insuring residency or time criterion met for inclusion in case management report. Data needs to be displayed in different categories separating 1) In project boundaries 2) Outside boundaries 3) Spend 12 or more hours a week/in project boundaries. Need clear definition and information from person who collects data.	Will populate database with data provided by community sites if steering committee decides on definitions.	Martha Hoff	12/7/05
3. Lead flow sheet: See attached	Change diamond "Is confirmed test >10" to ≥10.	Marti Potter	12/12/05
4. QNS tests result-case management and field testing process: QNS will be followed-up with venous. Child should be referred to PCP so in care for follow-up. To decrease barriers for client the grant can pay for venous test if necessary.	Biomonitoring Meeting 11/14 – 2:00 2:00pm.	Mishelle Macias	11/14/05
5. Communication <ul style="list-style-type: none"> • Handing off between CDPHE to DHHA • DHHA and DEH Environmental • CDPHE flagging "special cases" for DHHA • VB/I70 residents • Eliminating out of area referrals 	Northeast Housing must have follow-up plan for own fairs. State will help coordinate follow-up. For Northeast Housing and out of county.	Martha Hoff	12/12/05

Issue of Northeast Housing referring to this (VB/I-70) grant for follow-up. This program is not for other grants confirmatory testing. If special information known to CDPHE regarding a test Leovi is to alert Rashonda, to include in database.			
6. HIPPA forms missing: CDPHE must decide to draw test based on consent procedure at drawn sight. Tests can be run without consent. No tests to be run at DHHA if HIPPA form is not available.	Ensure all forms completed at health fair.	Mishelle Macias	Next Fair.
7. Reports: Case management report due early December. Mapping – Kevin is familiarizing himself with the program.	Kevin McCullen will review with Dr. Melinkovich. Marti and Rashonda will send sample to Martha Hoff.	Rashonda Gordon	12/4/05
8. Letters – review of content: Sent to community by Martha Hoff for review. Martha will send us her drafts.	Have letters ready for review.	Martha Hoff and Marti Potter	12/12/05

Next Meeting
December 12, 2005,
12:00 - 1:00 p.m., CHS Large Conference Room

**VB/I-70 Community Health Program
November 2005 Status Report
Small Grants and Community Funds Report**

Small Grants

Number of Small Grants Proposals Received (November): 0

Number of Small Grants Proposals Received to Date: 3

Number of Small Grants Awarded (November): 1

Number of Small Grants Awarded to Date: 3

Cumulative Total Award Amount: \$6,250.00

New Awards Summary

- ◇ A total of \$2500.00 was awarded to The Institute for Resident Advocates to fund leadership skills development for up to eight youth. Youth will be recruited from the Youth Development Partnership. Upon completion of training, each youth will move to a leadership position in a group of children. The youth will teach other children, attend neighborhood meetings as youth environmental advocates (lead and arsenic focus), and bring environmental advocacy (lead and arsenic focus) to their respective schools.

Community Funds Report

Funds Dispersed in November: none

Cumulative Funds Dispersed: \$1916.00

NOTE: The VB/I-70 CHP Outreach Development Group is currently seeking youth organizations to partner with in the assembly of outreach material folders. A stipend of \$7.00 per hour is available to each youth. Program stipends must be paid through organizations or individuals who are registered vendors with the City. Please contact Beverly Tafoya-Dominguez at 720-865-5471 for more information.